

## INVENTORSHIP IDENTIFICATION

**WARNING:** *If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.*

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (*if only one name is listed below*) or an original, first and joint inventor (*if plural names are listed below*) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

## TITLE OF INVENTION

MECHANICAL SHOCK PROTECTION FOR A DISC DRIVE

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## SPECIFICATION IDENTIFICATION

the specification of which:

(complete (a), (b) or (c))

- (a) ☒ is attached hereto.
- (b) ☐ was filed on \_\_\_\_\_, as ☐ Serial No. \_\_\_\_\_ or ☐ Express Mail No., not yet known \_\_\_\_\_ and was amended on \_\_\_\_\_ (*if applicable*).

**NOTE:** *Amendments filed after the original papers are deposited with the PTO that contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.*

- (c) ☐ was described and claimed in PCT International Application No. \_\_\_\_\_ filed on \_\_\_\_\_ and as amended under PCT Article 19 on \_\_\_\_\_ (*if any*).

## ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amendment by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56.

*(also check the following items, if desired)*

- ☒ and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and
- ☐ in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 CFR 1.98.

## PRIORITY CLAIM (35 U.S.C. § 119(a)-(d))

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

*(complete (d) or (e))*

- (d) ☐ no such applications have been filed.
- (e) ☐ such applications have been filed as follows.

**NOTE:** *Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.*

**PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN  
12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS  
APPLICATION AND ANY PRIORITY CLAIMS UNDER  
35 U.S.C. § 119(a)-(d)**

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

**CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL  
APPLICATION(S) (34 U.S.C. § 119(e))**

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

**PROVISIONAL APPLICATION NUMBER**

60/004,924

60/009,172

**FILING DATE**

October 6, 1995

December 22, 1995



of the above-named attorney(s) to accept and follow instructions from my representative(s).

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SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO:

*(Name and telephone number)*

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Bill D. McCarthy  
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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

*NOTE: Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other documents.*

Full name of sole or first inventor

Stephen

R.

Genheimer

(GIVEN NAME)

(MIDDLE INITIAL OR NAME)

FAMILY (OR LAST NAME)

Inventor's signature

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Date

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Full name of second joint inventor, if any

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■■■■

Full name of third inventor, if any

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P.

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Date 5/30/96

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■■■■

Full name of fourth inventor, if any

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Inventor's signature John D Stricklin

Date 6/3/96

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(Declaration and Power of Attorney [1-1] - Page 7 of 8)

(check proper box(es) for any of the following added page(s)  
that form a part of this declaration)

- ☐ Signature for fourth and subsequent joint inventors. Number of pages added \_\_\_\_.

\*\*\*

- ☐ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added \_\_\_\_.

\*\*\*

- ☐ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added \_\_\_\_.

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- ☐ Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time. (37 CFR 1.47)

\*\*\*

- ☐ Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-I-P) application. Number of pages added \_\_\_\_.

\*\*\*

- ☐ Authorization of attorney(s) to accept and follow instructions from representative.

\*\*\*

(if no further pages form a part of this Declaration  
then end this Declaration with this page and check the following item)

- ☒ This declaration ends with this page.